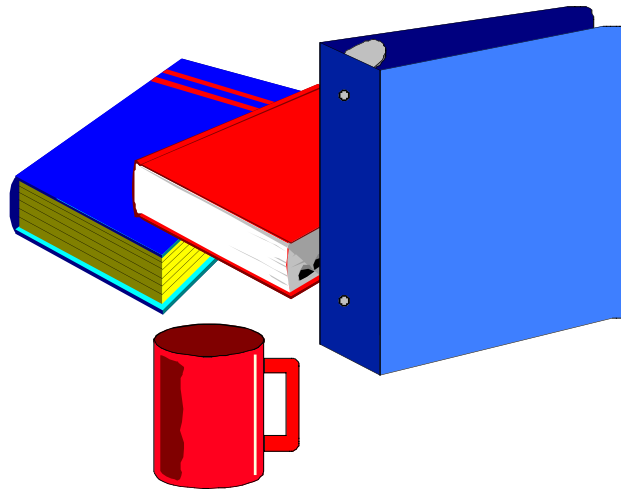


**Direct Support Professional Training
Year 2**

Teacher's Resource Guide



Session #10 Wellness: Medication

**Department of Education
and the
Regional Occupational Centers and Programs
in partnership with the
Department of Developmental Services**

2000

List of Class Sessions

Session	Topic	Time
1	Introduction and Supporting Choice: Identifying Preferences	3 hours
2	Person-Centered Planning and Services	3 hours
3	Person-Centered Planning and Services	3 hours
4	Communication, Problem-Solving and Conflict Resolution	3 hours
5	Positive Behavior Support: Understanding Behavior as Communication	3 hours
6	Positive Behavior Support: Adapting Support Strategies to Ensure Success	3 hours
7	Teaching Strategies: Personalizing Skill Development	3 hours
8	Teaching Strategies: Ensuring Meaningful Life Skills	3 hours
9	Supporting Quality Life Transitions	3 hours
10	Wellness: Medication	3 hours
11	Wellness: Promoting Good Health	3 hours
12	Assessment	2 hours
Total Class Sessions		12
Total Class Time		35 hours

Session: 10
Topic: Wellness: Medication

Core Objectives: Upon completion of this session, the DSP should be able to:

1. Demonstrate assistance and documentation in the self-administration of medication
2. Demonstrate awareness of basic pharmaceutical terminology, symbols, abbreviations and measurement equivalencies
3. Demonstrate knowledge of common medications
4. Demonstrate knowledge of medication side effects, drug reactions and drug interactions

Time:

<i>Key Words</i>	15 minutes
<i>Basic Pharmacology</i>	15 minutes
<i>Five Rights</i>	15 minutes
<i>Documentation of Medication Errors</i>	20 minutes
<i>Common Medications, Side Effects, and Drug Interactions</i>	15 minutes
<i>Role of DSP</i>	5 minutes
BREAK	15 minutes
<i>Activity Skill Check: Assisting with Self-Administration of Medications</i>	80 minutes
Total Time	180 minutes

- Materials:**
- Overhead Projector or LCD Projector with compatible laptop computer and Powerpoint application;
 - Hard copy of overheads or disk with Powerpoint presentation;
 - Some blank overheads, a flipchart, or chalkboard with markers, chalk, etc.;
 - *Resource Guide* for all class participants; and
 - A variety of bubble packs, medication containers (labeled with fictitious names, prescriptions), jelly beans, water, small paper cups, calibrated spoons and cups for liquid.

Note: You will need to work with a local pharmacist to obtain these materials.

Cautionary Statement

The material in this module is not intended to be used as advice on matters pertaining to the prescription of medications. Medical advice should be obtained from a licensed physician. This module highlights knowledge of common medications, assistance in self-administration, medication interactions and documentation. We urge you to talk with physicians, pharmacists, nurses, dietitians, and other safety and health care professionals to broaden your understanding of the fundamentals covered in this module.

Preparation

Instructor should read over the presentation outline, becoming thoroughly familiar with the information and instructions for the presentation. The information could be presented verbatim or paraphrased, as long as the essential information is conveyed.

Introduction

Say

Welcome to the first of two sessions on Wellness. In these two sessions we will discuss Medication and Promoting Good Health.

Do

Show overhead #1

Say

This session will cover Medications. We will spend the session on:

- *the Five Rights of medication administration*
- *assisting with self-administration of medication*
- *basic pharmaceutical terms*
- *common medications, which includes both prescribed and over-the-counter medications and their side effects*

Your Presentation Notes

Session 10: Wellness



Medication

Session #10, Overhead 1

- *food interactions with medications*
- *documentation*

Say

In this session, we will be working on some activities about medication. Successful completion of the skill checks will be required to complete Year 2 of the Direct Support Professional Training.

Key Words

Do

Show overhead #2 and #3

Say

Near the front of Session 10 in the Resource Guide, you will find a list of key words that you will hear during today's session. They are:

- Prescription
- Physician
- Pharmacy/Pharmacist
- Medication
- Self-Administration of Medication
- PRN
- Over the Counter
- Side Effects
- Drug Interactions (including food and alcohol)
- Ophthalmic
- Otic
- Medication Errors
- Documentation

Your Presentation Notes

Key Words

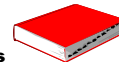
- **Prescription**
- **Physician**
- **Pharmacy/Pharmacist**
- **Medication**
- **Self-Administration of Medication**
- **PRN**
- **Over-the-Counter**



Session #10, Overhead 2

Key Words

- **Side Effects**
- **Drug Interactions (including food and alcohol)**
- **Ophthalmic**
- **Otic**
- **Medication Errors**
- **Documentation**



Session #10, Overhead 3

Basic Pharmacology

Your Presentation Notes

I. Medications

Say

All medications for people living in a licensed community care facility require a written physician's order. This includes both prescription and non-prescription medications. Prescription medications are medications which by law must be ordered by a physician. **Non-prescription medication** includes over-the-counter medications, vitamin supplements and herbal remedies. From now on, we will refer to non-prescription medications as over-the-counter medications.

For every prescription and over-the-counter medication for which the DSP provides assistance, there shall be a signed, dated, written order from a physician on a prescription blank which is maintained in the individual's file and a label on the medication. A physician's written order and a medication label are always provided for prescription medications. In community care licensed facilities, a physicians's written order and medication label are *also required* for over-the-counter medications (such as Tylenol). In a community care facility, prescription and over-the-counter medications are treated in a similar manner.

II. PRN Medications

Do

Show overhead #4

Say

A medication that is called PRN means the medication is taken-as-needed. PRN medications include prescription and over-the-counter medications. PRN medications must always be ordered by a physician. Community Care Licensing has established specific requirements for staff to assist individuals with self-administration of PRN medications. The requirements are different depending upon the needs of the individual. Individual needs are specified as follows:

1. Individuals who can determine and clearly communicate the need for the PRN medication
2. Individuals who cannot indicate the need for the PRN medication, but can communicate symptoms
3. Individuals who cannot determine the need and cannot communicate the symptoms for the need for the PRN medication
4. Children with PRN medications

Your Presentation Notes

Levels of Need (PRN Medication)

1. Individuals who can determine and clearly indicate the need
2. Individuals who cannot indicate the need, but can communicate symptoms
3. Individuals who cannot determine the need and cannot communicate the symptoms
4. Children

Session #10, Overhead 4

Do

Show overhead #4

Say

For these four different “levels of need,” we’ll be using the *Resource Guide* for guidelines. You can find these guidelines (refer to the page numbers).

For individuals who can determine and clearly communicate the need for the PRN medication there must be:

1. Signed and dated written order by the physician which is maintained in the individual’s record
2. Written physician statement that indicates that the individual can determine and clearly communicate the need for the medication
3. Physician order and medication label that includes
 - Specific symptoms that indicate the need for the medication
 - Exact dosage
 - Minimum hours between dosage
 - Maximum doses to be given in a 24 hour period

Your Presentation Notes

Levels of Need (PRN Medication)

1. Individuals who can determine and clearly indicate the need
2. Individuals who cannot indicate the need, but can communicate symptoms
3. Individuals who cannot determine the need and cannot communicate the symptoms
4. Children

Session #10, Overhead 4

Do

Show overhead #4

Say

For individuals who cannot indicate the need for the PRN medication, but can communicate symptoms there must be:

1. Signed and dated written order by the physician
2. Written physician statement that the individual cannot indicate the need for the PRN medication but can communicate his or her symptoms clearly
3. Physician order and medication label that includes
 - Specific symptoms that indicate the need for the medication which is maintained in the individual's record
 - Exact dosage
 - Minimum hours between dosage
 - Maximum doses to be given in a 24 hour period
4. A record of each dosage given that includes the date, time and dosage taken and the individual's response

Your Presentation Notes

Levels of Need (PRN Medication)

1. Individuals who can determine and clearly indicate the need
2. Individuals who cannot indicate the need, but can communicate symptoms
3. Individuals who cannot determine the need and cannot communicate the symptoms
4. Children

Session #10, Overhead 4

Do

Show overhead #4

Say

For individuals who cannot determine the need and cannot communicate the symptoms for the need for the PRN medication there must be:

1. A physician order and medication label that includes
 - Specific symptoms that indicate the need for the medication which is maintained in the individual's record
 - Exact dosage
 - Minimum hours between dosage
 - Maximum doses to be given in a 24 hour period

And the DSP must:

2. Contact the individual's physician before giving each dose, describe the individual's symptoms, and receive direction to assist the individual with each dose
3. The DSP must record the date and time of each contact with the physician and the physician's directions and maintain in the individual's record

Your Presentation Notes

Levels of Need (PRN Medication)

1. Individuals who can determine and clearly indicate the need
2. Individuals who cannot indicate the need, but can communicate symptoms
3. Individuals who cannot determine the need and cannot communicate the symptoms
4. Children

Session #10, Overhead 4

4. Record each dosage given that includes the date, time and dosage taken and the individual's response

Do

Show overhead #4

Say

In a Small Family Home for children, the DSP may assist the child with a PRN medication under the following conditions:

1. The physician has provided a signed and dated written order that includes written instructions for its use
2. Written instructions include the name of the child, the name of the PRN medication, instructions regarding when the medication should be stopped, and an indication when the physician should be contacted for reevaluation
3. The physician order and medication label should also include:
 - Specific symptoms that indicate the need for the medication. This information must be maintained in the individual's record
 - Exact dosage
 - Minimum hours between dosage
 - Maximum doses to be given in a 24 hour period

Your Presentation Notes

Levels of Need (PRN Medication)

1. Individuals who can determine and clearly indicate the need
2. Individuals who cannot indicate the need, but can communicate symptoms
3. Individuals who cannot determine the need and cannot communicate the symptoms
4. Children

Session #10, Overhead 4

4. The DSP must record the date and time of each contact with the physician and the physician's directions and maintain in the child's record
5. Record each dosage given that includes the date, time and dosage taken and the individual's response

III. Basic Pharmacy

Say

Before we do a skill check on assisting with self-administration of medications, we'll take a few minutes to review some pharmaceutical basics.

First, let's look at common symbols and abbreviations used in medicine.

Do

Show overhead #5

Do

Review the list of abbreviations and symbols.

Say

Oral medications are usually administered in mg (milligrams) or gm (grams), whereas liquid medications are prescribed in ml (milliliters), cc (centimeters), or oz (ounces). They may also be given in tsp (teaspoons) or tbsp (tablespoons). Sometimes oral

Your Presentation Notes

Abbreviations and Symbols

q, (Q) = Every	GM, gm. = grams (1,000 mg.)
Oz. = Ounce	h.s. (HS) = Hour of sleep (bedtime)
d. = Day	Cap = Capsule
tsp. = Teaspoon (or 5 ml.)	p.r.n. = when necessary, or as needed
h. = Hour	Tab = Tablet
Tbsp. = Tablespoon (3 tsp., or 15 ml.)	A.M. = Morning
b.i.d. = Twice a day	OTC = Over-the-counter
gr. = grains	P.M. = Afternoon/evening
t.i.d. = Three times a day	Rx = Prescription
mg. = milligrams	Qty = Quantity
q.i.d. = Four times a day	

Session #10, Overhead 5

medications, which are in granules, will also be prescribed in tsp, or tbsp.

An oral medication may be prescribed as:

Depakene 250mg, 1 tablet 4 times a day (q.i.d.)

A liquid medication may be prescribed as:

Depakene 250mg/5 cc. Give 5 cc 4 times a day (q.i.d.)

An example of a prescription for a medication supplied in granules is:

1 rounded teaspoon twice daily (b.i.d.)
Take with at least 8 oz. of cool liquid.

Ask

If an individual is taking Depakene 250 mg, 1 tablet 4 times a day, how many milligrams are being taken per day? **(Answer: 1,000 milligrams)** If the prescription is for Depakene 250 mg, 1 tablet, twice daily, how many milligrams are being taken per day? **(Answer: 500 milligrams)** It is good to know the exact daily dosage.

Your Presentation Notes

Do

Show overheads #6, #7

Say

This is the information the DSP should find and is required on every medication label.

If a label doesn't have all the necessary information, ask the pharmacist (or the physician) to add the needed information. Do not "scratch out" or write over or change a drug label in any way. Labeling may only be carried out by a licensed pharmacist according to Federal and State Guidelines. The label may not be altered by the DSP in any way.

Prescription labels with written instructions by the physician must also be provided for PRN and over-the-counter medication.

Do

Show overheads #8

Ask

Students to identify each item on the medication label:

What is the patient's name?

What is the name of the prescriber?

What date was the prescription filled?

Your Presentation Notes

Medication Labels

- Patient's Name;
- Prescriber's Name;
- Date prescribed (or filled);
- Name of the medication;
- Strength; (continued)



Session #10, Overhead 6

Medication Labels

- Directions for how to use the medication;
- Quantity in the prescription;
- Expiration date; and
- Other information (e.g., Prescription #; pharmacy; refills; etc.)

Session #10, Overhead 7

Medication Labels

Best Med Pharmacy	
RX 577524	Dr. Boyd
Patient: Jane Smith	07/01/00
Amoxicillin, 500 mg.	#30 capsules
Take 1 capsule 3 times daily for 10 days	
Expires 07/31/01	
No Refills	

Session #10, Overhead 8

What is the medication dose?

How many pills does Jane take each day?

Say

We will work on a medication label exercise.
In the Worksheet and Activities of your *Resource Guide*, you will find an activity titled Medication Label (refer to the page number).

Look at the label and then answer the questions at the bottom of the page.

After about 5 minutes . . .

Do

Show overhead #9 and discuss the correct answers

Do

Show overhead #10

Say

There are also various warning labels which may appear on a prescription or over-the-counter medication. What are some of the other warning labels you may have seen on medications?

Do

Write down answers on flip chart or blank transparency. Answers may include some of the following:

Your Presentation Notes

Medication Labels

Rite Med Pharmacy
RX 732561 Dr. Jones
Patient: John Doe 01/02/01
Prilosec, 20 mg. #30 capsules
Take 1 capsule 1 time daily
Expires 01/31/02
3 Refills

Fill in the blanks

Person: _____
Medication: _____
Dose: _____
Time: _____
Route: _____

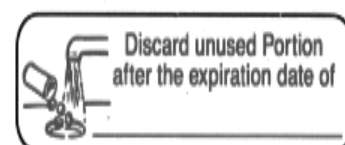
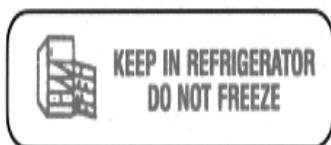
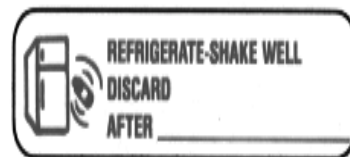
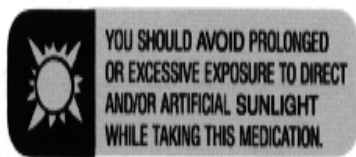
Session #10, Overhead 9

Common Label Warnings



Session #10, Overhead 10

Common Label Warnings



- For External Use Only
- Medication Should Be Taken With Plenty Of Water
- Do Not Take With Dairy Products, Antacids Or Iron Preparations Within One Hour Of This Medication
- Finish All This Medication Unless Otherwise Directed By Prescriber
- May Cause Discoloration Of The Urine Or Feces
- May Cause Dizziness Or Drowsiness
- Take Medication On An Empty Stomach 1 Hour Before Or 2 Hours After A Meal Unless Otherwise Directed By Your Doctor
- It May Be Advisable To Drink A Full Glass Of Orange Juice Or Eat A Banana Daily While Taking This Medication

Say

This list can be used by you as well as the individual with whom you work.

Note: Allow a few minutes to go over the list and answer any questions.

Your Presentation Notes

Ask

Have any of you ever been given sample medication?

Say

Sample medications may be used if given by the prescribing physician. Sample medications must have all the information required on a regular prescription label except pharmacy name and prescription number.

Another important thing to keep in mind is that all medications have both a trade name and a generic name. The trade name, or the brand name, is the name given by the manufacturer, such as Tylenol. The generic name is the name given by the federal government. The generic name for Tylenol is acetaminophen.

Usually the trade name is capitalized, such as Advil, but not the generic name, which in this case is ibuprofen. It is important to know both names of the medications that a consumer is taking. Many times overdoses of medications have been given, because a person did not know that both medications were the same. This can happen if more than one physician is prescribing medication, or if the pharmacy fills a new prescription by one name, while the old prescription was filled by the other name.

Your Presentation Notes

Ask

What should the DSP do if he or she sees that two prescriptions have been written for the same drug? (**Answer:** notify the physician) The prescription might be under the same trade or generic name or under different names. For example, one under the trade name and one under the generic name.

Five Rights of Assisting with Self-Administration of Medication

Say

We are now going to discuss the DSP's role in assisting individuals with self-administration of medication. We discussed the Five Rights of assisting with the self-administration of medication in Year 1. Who wants to begin by telling us one of the Five Rights?

Do

Go to flip chart, easel, or blank transparency. List the first correct response, and continue asking and listing responses until all Five Rights are recorded on the paper.

Your Presentation Notes

Do

Show overhead #11

Say

The Five Rights of Assisting with Self-Administration of Medication include:

1. Right Person

When assisting an individual with any medication, it is essential to know the person. You may ask the individual, "What is your name?" Do not say, "Are you John Jones?" Some consumers may say "Yes" to any question asked. If uncertain of the individual's name or identity, consult another staff member, who knows the individual, before assisting him or her with self-administration of any medication. Stay with the individual until certain that he or she has taken the medication.

2. Right Medication

Always check the name of the medication and the person on the pharmacy label. Make sure you are giving the right medication to the right person. Read the label three times and compare it to the medication ordered.

- The first check is when you removed the medication from the storage area.
- The second check is when you

Your Presentation Notes

The Five Rights

Right Person

Right Medication

Right Dose

Right Time

Right Route



Session #10, Overhead 11

remove the medication from its original container.

- The third check is just before you assist the individual with self-administration of the medication.

3. Right Dose

Read the pharmacy label for the correct dosage. Be alert to any changes in the dosage.

- Question the use of multiple tablets to provide a single dose of medicine.
- Question any change in the color, size, or form of medication.
- Be suspicious of any sudden large increases in medication dosages.

4. Right Time

Medication must be taken at a specific time of the day. Check the pharmacy label for the directions as to how often the medication should be taken.

- How long has it been since the last medication?
- Are foods or liquids to be taken with the medication?
- Are there certain foods or liquids to avoid when taking the medication? Is there a certain period of time to take the medication in relation to foods or liquids?

Your Presentation Notes

The Five Rights

Right Person

Right Medication

Right Dose

Right Time

Right Route



Session #10, Overhead 11

- Is it the right time of day, such as a.m. or p.m.?

5. Right Route

The pharmacy label should state the appropriate route for self-administering the prescribed medication. Remember to always check the medication label carefully. If you have any doubt as to whether the medication is in the correct form as ordered or can be self-administered as directed, consult with the prescribing physician or your pharmacist.

In the case of pills (tablets, capsules, etc.), liquids, under the tongue (sublingual), or between the teeth and cheek (buccal), the right route is “oral.” This means that the medication enters the body through the mouth.

Other routes include oral inhalers; nasal sprays; topical, which includes dermal patches or ointments to be applied to the skin; eye drops (ophthalmic) and ear (otic) drops.

Other more intrusive routes, such as intravenous administrations, intramuscular or subcutaneous injections, rectal and vaginal suppositories, or enemas are only to be administered by a licensed healthcare professional.

Your Presentation Notes

The Five Rights

Right Person

Right Medication

Right Dose

Right Time

Right Route



Session #10, Overhead 11

In some cases, an individual in an Adult Residential Facility may inject their own medication. If an adult is to self-administer an injectable medication (for example, insulin for diabetes), a physician must provide a written statement that this individual is capable of doing so.

If an individual takes his or her own medication independently, the medication must still be properly stored in a locked cabinet.

Documentation

Say

Now we're going to be discussing documentation of medications. To avoid errors, it is advised that pre-made labels from the pharmacy be placed on the Medication Log. Some pharmacies may also provide the medication log with the prescriptions already typed on the sheet. This is also acceptable. When possible, appropriate pre-made warning labels will also be placed on the Medication Log (such as "take with food"). A new prescription and label must be obtained each time a medication dosage is increased or decreased.

There are several types of Medication Logs. Whatever type your agency uses, the Five

Your Presentation Notes

Molina Family Home, 123 Main Street, Any City, CA 90000 (Ph: 123-4567)

Insurance: ☐ Medi-Cal • ☐ Medicare • Insurance No.

Primary care physician: _____ Pharmacy: _____
Legend: Initials means given. Meds given at ... D=day program • H=Relative or friend's home • E=Elsewhere
Signatures & initials: _____ for _____ for _____ for _____
Notes & comments: *(Suggest color-coding times of day with light highlighter.)*

Allergies

Rights should be easily identified on the form.

Do**Show overhead #12****Say**

Please find this form in the Worksheet and Activities section of your *Resource Guide* (refer to page number). The DSP who initiates or begins the form should complete the individual's name, the month of the year, the primary care physician, the pharmacy, and note any drug allergies.

Do

Show DSP where the required information should be entered on the form.

Ask

Who remembers the Five Rights? (Right Person, Right Medication, Right Dose, Right Time, Right Route).

Say

This information must be clearly written on the pre-made label from the pharmacy. The Medication Log will usually have a box or place for the DSP who is assisting with administration of medication to sign his or her initials. This must be done at the time the medication is taken by the individual, not before, and not hours later.

Your Presentation Notes

The form is titled "Medication Log" and includes a header with contact information for Medication Management, Inc. (121 Main Street, Apt. C-1, Waco, TX 76787, 800-451-5677). It features a large grid for recording medication administration, with columns for Date, Time, and Medication. The grid is divided into sections for Morning, Afternoon, and Evening. Below the grid, there are fields for the Primary Care Physician, Pharmacy, and Allergies. The form also includes a section for the DSP who initiates or begins the form to sign their name and initials.

Session #10, Overhead 12

Do

Show students how and where to sign and initial the Medication Log.

Ask

What time is a medication to be taken that is ordered once a day? In the morning? At 12:00 noon? At dinner time?

Say

This can be confusing. Generally, if a medication is ordered only once a day, it is usually given in the morning, around 8:00 or 9:00, unless it is ordered at bedtime. Some medications may be ordered before or after meals. It is important to check every medication. Often medications ordered twice a day are given in the morning and around dinner time, but some may be given in the morning and at bedtime. Again it is important to check the order to see if it makes a difference. Three times a day are often 9 a.m., 1:00 p.m. and 5:00 p.m., and four times a day are frequently 9 a.m., 1:00 p.m., 5:00 p.m. and 9:00 p.m. But always check the order. Medications ordered every 6 hours, must be given 6 hours apart, such as 6 a.m., 12:00 noon, 6 p.m. and 12:00 midnight. You may always ask the pharmacist to write the suggested times on the pre-made labels.

Your Presentation Notes

Let's look at samples of the Medication Log in the *Resource Guide* and pay particular attention to the times of administration (refer to the page numbers). REMEMBER: All changes in medication orders require a new pre-made label from the pharmacy. The use of pre-made labels avoids errors.

Medication Errors

Do

Show overhead #13

Ask

What is a medication error? Ask students to explain to the class what each error means. Examples could include:

Wrong Person: John took Sara's cough syrup

Wrong Dosage: Jean took two tablets instead of one

Wrong Time: Fred took his evening capsule in the morning

Wrong Route: Matt used his eye drops for his runny nose

Not Taken At All: Sally went to work and did not take her morning seizure medication

Your Presentation Notes

What About Errors?

- **Errors happen when:**
 - wrong Person
 - wrong Dosage
 - wrong Time
 - wrong Route
 - not Taken At All
- **Report immediately to the prescribing physician**

Session #10, Overhead 13

Say

Remember: It is very important to report all medication errors to the prescribing physician.

Say

We have talked about some common medication errors. Each facility should have a written policy on medication errors. You should review the policy at your facility. Now let's talk about how to document medication errors. Please divide into groups. We are going to look at different scenarios of medication errors. Discuss in your group the error(s), what should be done and how it should be documented.

Again, the general practice is to initial the square or box and put a circle around it. Then, on the back of the record, document what occurred. Notify the physician or physician on call immediately when a medication error occurs.

Remember medication errors also require that a Special Incident Report be sent to Community Care Licensing and the Regional Center. Keep these requirements in mind when you are discussing your case scenarios. Then choose a DSP from your group to report back to the class at the conclusion.

Your Presentation Notes

Do

From the 3 scenarios, assign one to each group. Give 10 minutes to discuss and then reconvene group. Have groups volunteer to report their scenario and the action that should be taken back to the whole class. (This will generally require notifying the physician, in addition to documenting.)

Note: On the following three pages, you will find copies of the scenarios with answers to *What Should You Do*.

Do

Discuss scenarios with the class as the groups present their recommendations.

Common Medications

Say

Now let's talk about common medications often prescribed for individuals with developmental disabilities. I am going to give you some examples of common medications. You are not expected to memorize these examples. I just want you to be familiar with some of the terms. Your resource for information about medications is the physician or pharmacist.

Since developmental disabilities usually involves the central nervous system, most

Your Presentation Notes

Activities for Documenting Medication Errors

SCENARIO 1

You are working as a DSP on the evening shift in a small family home with 6 adult residents. This morning, a new resident, Ruth Ann Jones, age 55, moved in. Ruth Ann is diagnosed with mental retardation, cause unknown. You are assisting with the evening medications, and this is the first time you will be assisting Ruth Ann. When you look at the Medication Log, you notice that Ruth Ann takes many medications. These include:

- Prilosec 20 mg daily;
- Prozac 20 mg twice daily (am and noon);
- Haldol 2.0 mg 3 times a day;
- Inderal 40 mg 3 times a day;
- Peri-Colace 2 capsules at bedtime

You prepare the medications and assist Ruth Ann in taking them. When you sit down to document the medications given, you notice that only two, Haldol and Inderal, were to be given at 5:00 p.m. You gave the four medications ordered for earlier in the day, which included Prilosec and Prozac, as well as Haldol and Inderal.

Which one of the 5 rights was not checked correctly? (Answer: Right time).

What should you do? (Answer: Notify the physician that the extra doses of Prilosec and Prozac were given. Observe Ruth Ann for any reactions. This is not likely with just one extra dosage of either of these medications. However, it could possibly be more serious if an extra dose of Haldol or Inderal were given. Document the error on the Medication Log and complete a Special Incident Report.

SCENARIO 2

You are a DSP working in a small family home for children under the age of 18. You have 6 children in your home under the age of 8. You have prepared the medications for Sarah, who is 2 years old. The medications include: Proventil Syrup 2mg/5ml, 5ml daily; Tegretol 100mg/5ml, 5 ml twice daily; Cisapride 1mg/1ml, 3 ml four times a day, before meals and before sleep. It is 8:00 a.m. You assist Sarah to take 5 ml of each medication. When you document on the Medication Log, you notice that Cisapride was ordered 3 ml four times a day.

Which of the 5 rights were not checked correctly? (Answer: Right dose).

What should you do? (Answer: Notify the physician or physician on call. Follow physician's orders. Observe for symptoms of drug reaction. Document error on Medication Log. Complete Special Incident Report. Document any reactions in the individual's record).

SCENARIO 3

You are a DSP working in a small family home with 3 children. You prepare the medications for Connor, who is 3 years old. Connor currently has an upper respiratory infection, along with otitis media (ear infection) and conjunctivitis (eye infection). New prescriptions include Septra 10 ml by mouth every 12 hours; Pediacare Infant Drops, 2 dropperfuls by mouth four times a day; Sulamyd Ophthalmic Solution 1 drop in left eye every 2 hours; Cortisporin Otic Drops, 3 drops in each ear 4 times a day. You assist with Connor's medication, and following administration of the Cortisporin Otic Drops, you realize that you have placed the drops in the eye, rather than the ear.

Which of the 5 rights was violated? (Answer: Right route).

What should you do? (Answer: Notify physician or physician on call. Follow physician's orders. This will probably involve flushing the eye. Observe for reaction. Continue to document error on Medication Log. Complete Special Incident Report).

drugs that are prescribed for people with developmental disabilities affect the central nervous system.

For example, you will see a number of prescribed medications for the prevention of seizures. Seizures, which are caused by uncontrolled electrical discharges in the brain, are common in people with developmental disabilities. Anti-convulsant medications act to prevent seizures.

Ask

Students to name some examples of medications which prescribed to affect the central nervous system. (Answers should include those medications found on overhead #14.)

Do

Show overhead #14

Say

Another category of drugs which affect the central nervous system are psychotropic medications. These drugs are intended to affect thinking or feeling and are sometimes taken by people with developmental disabilities. These drugs are often categorized as anti-anxiety, anti-depression, and anti-psychotic medications. Anti-anxiety medications are used to reduce anxiety or anxiousness. Here are some examples.

Your Presentation Notes

Anticonvulsants

- **Phenobarbital**
- **Dilantin**
- **Depakene or Depakote**
- **Tegretol**
- **Clonopin**
- **Mysoline**
- **Neurontin**
- **Lamictal**

Session #10, Overhead 14

Do

Show overhead #15

Say

Here are some examples of anti-depression drugs which are used to treat depression.

Do

Show overhead #16

Say

Here are some examples of anti-psychotic drugs which are used to treat a variety of psychiatric disorders such as hallucinations and mood disorders.

Do

Show overhead #17

Side Effects

Say

"Side effects" are effects produced by a medication other than the intended effect. Side effects are usually undesired effects of the drug. Whether or not the desired effect occurs, for example, control of seizures, there is always the possibility that undesired side effects will occur. Side effects may be predictable, for example, drowsiness with seizure medication, or a side effect may be entirely unexpected and unpredictable.

Your Presentation Notes

Anti-Anxiety Drugs

- Phenobarbital
- Ativan
- Valium
- Xanax
- Librium

Session #10, Overhead 15

Antidepressants

- Elavil
- Trofanil
- Lithium
- Zoloft
- Desyrel
- Paxil
- Prozac

Session #10, Overhead 16

Antipsychotics

- Thorazine
- Prolixin
- Mellaril
- Navane
- Haldol

Session #10, Overhead 17

Side effects may be harmless, such as urine discoloration when taking Dilantin. Side effects, such as a severe allergic reaction to penicillin, may also be potentially fatal.

WHEN A PERSON HAS A KNOWN ALLERGY TO A MEDICATION, ALL RECORDS FOR THE INDIVIDUAL MUST INDICATE THE ALLERGY(IES).

Ask

What are some examples of side effects?

Record answers on a blank overhead or flip chart. Answers could include: dizziness, drowsiness, confusion, insomnia, psychosis, slurred speech, blurred vision, nervousness, constipation, tics, restlessness, dry mouth.

Say

As you can see, these side effects are a combination of physical and behavioral changes. Physical and behavioral changes that are due to the effects of the medication (side effects) are often difficult to sort out from those that are not due to the medication.

Interpretation (deciding the meaning) of a sign or symptom is the responsibility of the physician. **Your responsibility as the DSP is to consistently and accurately observe, report and record any change in physical conditions or behavior.**

Your Presentation Notes

Say

As the DSP you need to know what medications are being used by people in the home where you work and learn about each medication. The DSP needs to know what possible side effects may occur, and be sure to ask the physician what kind of reactions should be brought immediately to his or her attention. Write these down in the individual's record. Everyone DSP should know what to do if a side effect or reaction occurs. **CALL THE PHYSICIAN.**

Adverse reactions or side effects can occur at any time. Some adverse reactions or side effects may not occur for several hours while some may happen immediately. If a serious adverse reaction occurs, the DSP must contact the prescribing physician, **call 911**, or take the person to the emergency room for treatment. Other, more minor changes should be brought immediately to the attention of those responsible for the home.

When in doubt, always err on the side of caution.

Do

In the Worksheets and Activities section of your *Resource Guide*, you will find a copy of **Medication Safety Guidelines** (refer to page number) and a sample insert.

Your Presentation Notes

Medication Safety Guidelines

Dear Physician/Pharmacist

To assist me in taking my medications properly, please help me answer these questions.

1. What is the name of my medication?
Brand Name: _____
Generic Name: _____
2. What is the medicine supposed to do?
3. What is the dose?
4. What time(s) should I take this medication?
5. Should I take this medication with food? Yes ____ No ____
At least 1 hour before meals? Yes ____ No ____
At least 2 hours after meals? Yes ____ No ____
6. Are there any food(s) I should avoid?
7. Are there any beverages/drinks (alcohol) I should avoid?
8. Are there any vitamins, herbs or supplements I should avoid?
9. What other medications should I avoid?
10. Are there any over-the-counter (OTC) medications I should avoid?
11. How long will it take for the medicine to start working?
12. Are there any symptoms so serious you would want to know about them immediately?
13. Are there any tests I should complete before starting the medication or while using it?
14. What side effects are common with my medicine?
15. If the medication being prescribed for a long period of time, are there any long-term effects?

Say

Every time a new medication is prescribed, the DSP should ask the pharmacist for a copy of the medication information sheet. The DSP should also ask the pharmacist to review the information sheet. The medication information sheet should be kept for future reference in the individual's record.

It is the DSP's responsibility to clearly understand the medication and both desired and undesired (side effects) of the medication. It is recommended that when talking to the physician and pharmacist, the DSP use the Medication Safety Guidelines tool to be sure that all necessary questions about the medication are answered. Any time you have questions, don't hesitate to contact the physician or pharmacist about the medication. Note: Review questions on the Medication Safety Guidelines sheet.

Don't be bashful! Get to know your pharmacist. It is recommended that each facility use only one pharmacy. This enables the DSP to develop a relationship with the pharmacy, and the pharmacy to get to know the medication histories of the individuals living in the home.

Your Presentation Notes

Drug and Food Interactions

Say

Adverse reactions or side effects may be caused by the interaction of medications or interaction with foods or alcohol. The effectiveness of a medication may be increased or decreased by adding other medications. For example, if Tagamet (for treatment of ulcers) is given with Dilantin (used to control seizures), the blood levels of Dilantin may be increased to toxic or dangerous levels. Anti-biotics may reduce the effectiveness of oral contraceptives.

Alcohol in combination with anti-anxiety drugs such as Librium, Valium, or Xanax can be dangerous. Blood pressure medicine taken with grapefruit juice can make a person sick. Once again, it is the DSPs responsibility to ask questions and get all the necessary information about the medications that individuals are taking, including information about possible drug and food interactions,

Your Presentation Notes

Role of the DSP

Do

Show overhead #18

Say

The reminders on this overhead are the important skills that the DSP needs to know to assist individuals with the safe self-administration of medications:

- **IDENTIFY** and report symptoms accurately and completely
- **KNOW THE PERSON!** This includes the person's past medical and life history, medications used in the past, what worked and what didn't.
- **UNDERSTAND** what drug(s) is being used and why
- **HAVE KNOWLEDGE** about possible drug side effects and interactions with other drugs and food
- **CONTINUOUSLY** observe the person's condition and evaluate response to the treatment program

Your Presentation Notes

Role of the DSP

- **Identify and report symptoms**
- **Know the person!!**
- **Understand what drug and why**
- **Knowledge about possible side effects and interactions**
- **Observation**

Session #10, Overhead 18

Procedures for Assisting With Self-Administration of Medications

Say

Now we will discuss procedures for the DSP to follow when assisting with self-administration of medications. Upon completion of this session, I will be assessing each of you individually in this area.

Remember, before a DSP can assist with any medication, prescription, PRN or over-the-counter medication, there must be a written, dated, and signed physician's order in the individual's record.

Only one DSP should be assisting an individual with medications at any given time. That DSP should complete the entire process of assisting an individual with self-administration of medication from beginning to end. Never hand a medication to one person to pass on to another. The DSP should always prepare medication in a clean, well-lit, quiet area. Allow plenty of time, avoid rushing and stay focused.

While Community Care Licensing regulations permit the set up of medications up to 24 hours in advance, there are many potential problems with this practice.

Your Presentation Notes

Ask

Can you think of some of the problems with setting up medications in advance? Answers should include wrong person, wrong medication, wrong dose.

Say

For these reasons, it is recommended that set up of medications be done immediately before assisting an individual with self-administration of medications.

Do

Show overheads #19, #20, #21

Say

The following are the steps to be taken when assisting an individual with self-administration of medication.

The DSP:

1. Washes his or her hands
2. Helps the individual wash his or her hands

Hand washing reduces risk of contamination
3. Gathers supplies, including medication log, labeled container, glass of water, straws, paper cup and other necessary items

Your Presentation Notes

**Assisting with
Self-Administration
of Medication**

1. DSP washes his or her hands
2. Individual washes his or her hands
3. DSP gathers supplies
4. DSP checks Five Rights
5. DSP pours correct dose

Session #10, Overhead 19

4. Checks the Five Rights
 - Right Person
 - Right Medication
 - Right Dose
 - Right Time
 - Right Route

Checking for the Five Rights reduces medication errors

5. Pours the correct dose (capsule or tablet) into the cap and then into a labeled (including name) medication paper cup or pours the correct dose into a calibrated cup or spoon label with the individual's name for a liquid medication

6. Again, checks the Five Rights
 - Right Person
 - Right Medication
 - Right Dose
 - Right Time
 - Right Route

7. Talks with the individual about the medication

Talk to the individual about what you are doing and why. This is a good time for the individual to learn about the medication that they are taking.

8. Again, checks the Five Rights.
 - Right Person
 - Right Medication
 - Right Dose
 - Right Time
 - Right Route

Your Presentation Notes

Assisting with Self-Administration of Medication

6. **Again, check the Five Rights**
7. **Talk with the Individual**
8. **Again, check the Five Rights**
9. **Place medication near individual**
10. **Offer water**

Session #10, Overhead 20

9. Places the medication within the individual's reach.
10. Offers a glass of water (at least 4 oz.)
11. Makes sure that the individual swallows the medication.

Stay with the individual until you are certain that they have taken the medication.
12. Documents that medication was taken on the Medication Log
13. Returns the container to the proper locked storage area
14. Observes for Side Effects
15. Reports Side Effects to Physician

Assisting with Tablets, Capsules, and Liquids

Say

Always ask the physician (and pharmacist) to give you the medicine in the proper form for the individual based upon their needs and preferences. For example, one person may have difficulty swallowing capsules and prefer liquid medication, while another may prefer capsules.

Ask for help from the prescribing physician or pharmacist if you are unsure about any

Your Presentation Notes

Assisting with Self-Administration of Medication

- 11. Check that medication is swallowed**
- 12. Document on Medication Log**
- 13. Return container to locked storage**
- 14. Observe for side effects**
- 15. Report side effects to physician**

Session #10, Overhead 21

step in the preparation of, assistance with, or documentation of medications.

Say

For medications in tablet or capsule (pill) form follow all of the steps in the procedures for self-administration of medications. When assisting with capsules or tablets, the following additional steps should be taken:

1. Pour (or punch out, if bubble pack) the correct dose into the bottle cap and THEN into the container used for holding the tablets or capsules before the person takes them. The container should be labeled with individual's name. It is recommended that the DSP use a disposable paper cup for the container. If too many pills pour out, return the pills from the bottle cap into the container. If using a bubble pack, punch out the correct dose into the container.
2. Again check the medication label to assure the ordered dosage has been removed from the labeled container.
3. When assisting the person who is taking the pills, always provide a glass of water. If pills are not taken with liquids they can irritate the throat and intestinal tract and they may not be correctly absorbed. Again, check the pharmacy label. Some medications must be taken with FOOD, and there may be other special instructions.

Your Presentation Notes

Do

Show overhead #22

Say

If someone has problems taking the capsule or tablet the DSP might:

- Ask the physician if the medication is available in liquid or chewable forms.
- Ask physician if medication can be crushed.
- Recommend to the person that he or she take a small sip of water before placing the pill in the mouth can make swallowing the capsule or tablet easier.
- Recommend to the person that he or she tilt their head forward slightly and take a drink of water. This might make swallowing easier. (Throwing the head back may increase the risk of choking.)

Your Presentation Notes

Problems Swallowing Tablets or Capsules

- Ask physician or pharmacist if available in liquid or chewable form
- Ask physician or pharmacist if medication can be crushed
- Ask individual to take a small sip of water before taking the pill
- Remind or assist the individual with tilting his or her head forward

Session #10, Overhead 22

Assisting with Liquid Medications

Your Presentation Notes

Say

For medications in liquid form, follow all of the procedures for self-administration of medications. When assisting with liquid medications, these additional steps should be taken:

1. Check the label for any directions to “shake well” and do so if indicated.
2. Remove the cap from the bottle and place it upside down on the work surface.
3. The liquid medication should come with a measuring device such as a spoon or cup. If there is no measuring device available, check with your pharmacist or physician to determine exactly how the medication should be measured. Be sure to use a cup with markings, or specially-designed spoon with markings, or a fluid syringe (without needle) with clear markings, when taking teaspoons and tablespoons of a liquid medication. Regular eating spoons (metal or plastic) are simply not accurate enough.
4. Locate the marking for the ordered amount on your medicine cup or other measuring device. Keeping your thumbnail on the mark, hold the cup at eye level and pour the correct amount of medication. (Accuracy is important, so you may want to place

the cup on a flat surface to pour and measure. Pour the medication away from the label to prevent staining same with any spills.)

5. If too much liquid is poured, do not return it to the bottle – discard it.
6. After pouring the medication, double check that the amount is the amount that has been indicated on the label.
7. Wipe the lip of the bottle with a clean, damp paper towel before replacing the cap.
8. If any liquid is spilled on the outside of the bottle, also wipe with a clean paper towel.
9. Provide water after the liquid has been swallowed. Again, check the pharmacy label for any special instructions.
10. Wash the measuring device with warm water and air dry on a paper towel.

Do

Show overhead #23

Say

What if an individual does not swallow medications with an adequate amount of water?

- If the individual has difficulty drinking or swallowing liquids, ask the

Your Presentation Notes

**Does Not Swallow
with Enough Water**

- **Ask physician or pharmacist about:**
 - **Jell-O that is semi-liquid or jelled**
 - **Apple juice or other medication-compatible juice**

Session #10, Overhead 23

physician or pharmacist about these alternatives:

- Jell-O that is semi-liquid or jelled
- Apple juice or other medication-compatible juice

Do

Show overhead #24

Say

If the person has difficulty taking liquid medications, the DSP might:

- Give the individual a straw to use to decrease spillage and bad taste
- Give the person ice chips to suck on just before taking the medication. This will often help mask the bad taste
- Ask physician or pharmacist if medication can be diluted to cover a bad taste
- Ask physician or pharmacist if there is another medication-compatible juice that can be used (for example, apple juice)

Say

Let's review and learn some additional best practices about what we know about tablets capsules and liquid medication. We will use the 'thumbs up', "thumbs down" or "thumbs to the side" to answer these questions.

Your Presentation Notes

Difficulty Taking Liquid Medication

- Offer a straw
- Offer ice chips
- Can medication be diluted?
- Can a different liquid be used?

Session #10, Overhead 24

If you know a statement is correct, give the "thumb up."

If you know a statement is wrong or incorrect, give the "thumb down."

If you aren't sure of the answer, give me a "thumb to the side."

Note: Be sure to clarify all statements as needed so DSPs learn the correct answer.

Say

NEVER crush any kinds of tablets unless the prescribing physician has given specific directions to do so. **(up)**

Say

It is okay to open capsules. **(down)**

[**Correct Answer:** DO NOT open capsules and empty out the contents.]

Say

It is okay to hide medication in food or liquid. **(down)**

[**Correct Answer:** Never try to disguise a medication by putting it in food or liquid.]

Say

Swallowing capsules with water is helpful. **(up)**

Your Presentation Notes

Say

Altering the form of capsules or tablets may have an impact on their effectiveness by changing the way a person's body absorbs them. **(up)**

Say

If there is any question about what is safe to do, contact the prescribing physician or pharmacist.

Say

Any food can be taken with medication.

(down)

[**Correct Answer:** Some foods can change the way certain medications work. Read the medication label, it may tell you what to avoid.]

For liquid medications:

Say

You should never shake liquid medication.

(down)

[**Correct Answer:** Check the label for any directions to "shake well" and do so if indicated.]

Say

Any juice glass is good for measuring liquid medication. **(down)**

[**Correct Answer:** The liquid medication should come with a measuring device such as a spoon or cup. If there is no measuring

Your Presentation Notes

device available, check with your pharmacist or physician to determine exactly how the medication should be measured. Be sure to use a cup with markings, or specially-designed spoon with markings, or a fluid syringe (without needle) with clear markings, when taking teaspoons and tablespoons of a liquid medication. Regular eating spoons (metal or plastic) are simply not accurate enough.]

Say

Locate the marking for the ordered amount on your medicine cup or other measuring device. Accuracy is important, so you may want to place the cup on a flat surface to pour and measure. Pour the medication away from the label to prevent staining same with any spills. **(up)**

Say

If too much liquid is poured, pour it back into the bottle. **(down)**

[Correct Answer: If too much liquid is poured, do not return it to the bottle — discard it.]

Say

After pouring the medication, double check that the amount is the amount that has been indicated on the label. **(up)**

Your Presentation Notes

Label Information

Labels for capsules (one for container and one for bubble pack)

Jelly bean red (Generic for JELLY BIRD EGGS, RED) 100 mg. Tablets Quantity 1 tablet Take one tablet daily Dr. R. Kildare, M.D. Expiration, January 2003	Prescription #12345 Date 1/3/01
---	--

Jelly bean green (Generic for JELLY BIRD EGGS, GREEN) 100 mg. Tablets Quantity 1 tablet Take one tablet daily Dr. R. Kildare, M.D. Expiration, January 2003	Prescription #12346 Date 1/3/01
---	--

Label for liquid medication

Goofensin (Generic for Robertussin) Quantity 100cc 200mg/5cc Take 5cc daily Dr. R. Kildare, M.D. Expiration, January 2003	Prescription #12347 Date 1/3/01
---	--

Say

Wipe the lip of the bottle with a clean, damp paper towel before replacing the cap. **(up)**

Say

If any liquid is spilled on the outside of the bottle, also wipe with a clean paper towel.
(up)

Say

If an individual takes liquid medication, they don't need any water. **(down)**

[**Correct Answer:** Provide water after the liquid has been swallowed. Again, check the pharmacy label for any special instructions.]

Say

Wash the measuring device with warm water and air dry on a paper towel. **(up)**

Break

**Skill Check: Self Administration
of Medications**

Do

Work with a local pharmacist to gather necessary supplies for the activity. Follow the teachers instructions for Skill Check #1 on the following page.

Your Presentation Notes

Direct Support Professional (DSP) Training
SKILL CHECK #1
Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications
TEACHER INSTRUCTIONS

PRE-CLASS ACTIVITIES:

1. Gather supplies for skill checks. Have enough supplies for several practice sessions and up to three skill checks for each student.

Labeled storage units for medications (e.g., plastic basket)
Medications in a properly labeled containers and bubble packs
Liquid medication in properly labeled containers
Plastic calibrated medicine cups and medication spoons
Small paper cups for tablets or capsules
Paper cups for water
Water
Tissues
Medication Logs
Pens
Skill Check #1 Worksheets

2. Place labeled medication containers and bubble pack in the labeled storage unit
3. Put all supplies in central area in the classroom.

CLASSROOM ACTIVITIES:

1. Review information on medications from Session 10. SAY... I know that many of you have been assisting with medication for a long time. For others this may be a new responsibility. Whatever your level of experience, assisting with medication is a very high-risk activity. The critical skills that you will be learning today are designed to reduce as many opportunities for errors as possible. They are designed to provide maximum protections for the individuals you are assisting as well as yourself. No one wants to be responsible for causing injury or harm to someone else, and the information being shared today will help to prevent such an occurrence.

The goal for the day is to learn step-by-step procedures to assist an individual in taking an accurate dose of medication. The procedures that you will practice may, at first, seem difficult. You will be given lots of time to practice and, as you feel more confident, the process will get easier and take less time. In order to satisfactorily complete this training, you will be required to demonstrate your ability to safely assist individuals with self administration of medications.

In the video you are about to see, the direct support staff demonstrates the critical skills necessary for ensuring safe assistance with self administration of medication.

2. View *Five Rights* Video
3. Hand out and demonstrate procedures on *Skill Sheet # 1 Worksheet, Assisting Individuals with Self Administration of Tablets, Capsules and Liquid Medications*.

SKILL CHECK #1

Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications

4. Instruct students to choose a partner and to practice procedures for both tablets and capsules, and liquids using the *Skill Sheet # 1 Worksheet*. The student should check off each step correctly completed by his or her partner (Partner Check). When the student is comfortable that he or she knows all of the steps, the student should ask the teacher to complete the Teacher Check.
5. Using the *Worksheet*, observe the student and check off each step correctly completed (Teacher Check). After certifying that the student has completed all the steps in the skill sequence correctly from beginning to end (Teacher Check), sign and date the *Skill Check #1 Certification* form. The student is limited to three attempts. The student should not use the *Worksheet* during the Teacher Check.

COMPETENCY: Each student is required to complete *Skill Check #1 Worksheet, Assisting Individuals With Self Administration of Tablets, Capsules and Liquid Medications*, with **no errors** in **critical steps**. The critical steps are identified in bold letters in the Supplemental Teacher Instructions. These steps must be completed correctly for the student to pass the skill check.

Direct Support Professional (DSP) Training
SUPPLEMENTAL TEACHER INSTRUCTIONS

SKILL CHECK #1

Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications

STUDENT INSTRUCTIONS

The following underlined and italicized supplemental information is being provided to assist the teacher in conducting this skill check.

Directions:

Partner with another member of the class. Each partner should have a *Skill Check #1 Worksheet*. Using the *Worksheet*, practice all the steps in this skill. Have your partner check off each step you correctly complete (PARTNER CHECK). When you are comfortable that you are able to correctly complete all the steps without using the *Worksheet*, ask the teacher to complete the Teacher Check.

Reminders for Assisting With Self Administration:

- ALWAYS store medication in a locked cabinet and/or refrigerator
- NEVER leave medication unattended once it has been removed from the locked storage area
- ALWAYS check for known allergies
- ALWAYS read the medication label carefully and note any warning labels
- Assist only with medication from labeled containers
- Assist only with medication that you have prepared

HELPFUL HINT

*When completing this skill check, remember that you are checking the “**FIVE Rights**” **THREE** Times by reading the medication label and comparing to the Medication Log.*

- **The first check** is when you remove the medication from the locked storage area or storage container.
- **The second check** is when you remove the medication from its original labeled container.
- **The third check** is just before you assist the person with self administration.

COMPETENCY: Each student is required to complete *Skill Check #1 Worksheet, Assisting Individuals With Self-Administration of Tablets, Capsules and Liquid Medications*, with no errors in critical steps.

SUPPLEMENTAL TEACHER INSTRUCTIONS

SKILL CHECK #1 WORKSHEET

Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications

Scenario: The time is 8:00 a.m. in the morning. The date is the day of the class. The staff is assisting Jacob Smith with self administration of medication.

TEACHER NOTE: *Critical steps in the skill sequence are bolded. The student must correctly complete these critical steps in order to pass the skill check. Refer to notes in each step.*

Please initial each step when completed correctly	Partner Check	Teacher Check		
		Attempt #1	Attempt #2	Attempt #3
STEPS				
		Date	Date	Date
1. Help the person who you are assisting to wash his or her hands	_____	_____	_____	_____
2. <u>Critical skill:</u> Wash your hands	_____	_____	_____	_____
<i>Note (#2): Student verbalizes that he or she has washed his or her hands</i>				
3. <u>Critical skill:</u> Get the Medication Log for the person you are assisting	_____	_____	_____	_____
4. <u>Critical skill:</u> Gather supplies:	_____	_____	_____	_____
• The labeled medication storage unit with the medication containers				
• Paper cups for tablets and capsules, plastic calibrated measuring cup or medication spoon for liquid				
• Glass of water				
• Pen				
• Tissues				
<i>Note (#4): Recommend supplies be prepackaged</i>				
5. <u>Critical skill:</u> As you take each medication container from the person's storage unit, read the medication label and compare to the Medication Log for the:				
• Right Person	_____	_____	_____	_____
• Right Medication	_____	_____	_____	_____
• Right Dose	_____	_____	_____	_____
• Right Time	_____	_____	_____	_____
Check the time on your watch/clock				
• Right Route	_____	_____	_____	_____
<i>Note (#5): This is the customary order; however, the teacher may pass the student as long as all 5 Rights are checked. The student should verbalize the 5 Rights as he or she makes the comparison.</i>				

SUPPLEMENTAL TEACHER INSTRUCTIONS**SKILL CHECK #1 WORKSHEET***Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications*

Please initial each step when completed correctly	Partner Check	Teacher Check
---	------------------	------------------

Attempt #1	Attempt #2	Attempt #3
---------------	---------------	---------------

STEPS

6. **Critical skill:** Again, as you prepare the medications, read the medication label and compare to the Medication Log for the:

- Right Person
 - Right Medication
 - Right Dose
 - Right Time
- Check the time on your watch/clock

- Right Route

Note (#6): Same as in # 5

7. **Critical skill:** For tablets or capsules, **pour the correct dose** into the lid of the container and then into a small paper cup

8. For bubblepacks, push tablets/capsules from the bubblepack into a small paper cup

9. For liquid medication, **pour the correct dose** into the plastic measuring cup held at eye level

- View the medication in the cup on a flat surface
 - Pour away from the medication label to avoid spills
 - If any spills on the bottle, wipe away
- OR

When using a measuring spoon:

- Locate the marking for the dose
- Hold the device at eye level and fill to the correct dosage marking
- Pour away from the medication label to avoid spills
- If any spills on the bottle, wipe away

Note (#s7, 8, and 9): The critical skill is pouring the Right medication in the Right amount. Application of the above steps is recommended in order to clearly identify medications as they are poured and to ensure that the correct amount is poured. While not recommended as best practice, pouring tablets/capsules directly into a paper cup and use of one paper cup are acceptable.

SUPPLEMENTAL TEACHER INSTRUCTIONS**SKILL CHECK #1 WORKSHEET***Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications*

Please initial each step when completed correctly	Partner Check	Teacher Check		
---	------------------	------------------	--	--

Attempt #1	Attempt #2	Attempt #3
---------------	---------------	---------------

STEPS

10. Talk with the person you are assisting about what you are doing and about why he or she is taking each medication

_____	_____	_____	_____
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11. **Critical skill:** Again, just before putting the medication within the person's reach, read the medication label and compare to the Medication Log for the:

_____	_____	_____	_____
-------	-------	-------	-------

- Right Person
- Right Medication
- Right Dose

- Right Time
Check the time on your watch/clock

- Right Route

Note (#11): Same as in #s 5 and 6. This is the customary order; however, the teacher may pass the student as long as all 5 Rights are checked. The student should verbalize the 5 Rights as he or she makes the comparison.

12. **Critical skill:** Place the medication within the person's reach

_____	_____	_____	_____
-------	-------	-------	-------

13. **Critical skill:** Offer a glass of water

_____	_____	_____	_____
-------	-------	-------	-------

14. **Critical skill:** Make sure that the person takes the medication and drinks water

_____	_____	_____	_____
-------	-------	-------	-------

15. **Critical skill:** Record that the person took their medication by initialing the date and time in the proper box on the Medication Log

_____	_____	_____	_____
-------	-------	-------	-------

16. **Critical skill:** Return the medication containers and bubble pack to the person's storage unit. As you do so, read the labels to check that the person's name on the medication container label is the same as the name on the storage unit

_____	_____	_____	_____
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Direct Support Professional (DSP) Training
SUPPLEMENTAL TEACHER INSTRUCTIONS
SKILL CHECK #1

Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications
CERTIFICATION

Note: Teacher keeps a record of the skill check results on the Student Summary Sheet and on the test-after-training Scantron Answer Sheet. Bubble in "A" for Pass and "B" for Fail as follows:

#99 – Skill Check # 1: Assisting With Self-Administration of Medication;

#100 – Skill Check #2: Gloving Technique.

Upon completion of the skill check, the Skill Check Worksheet and the Certification forms should be given to the student.

This is to certify that (Name of Student)_____

correctly completed all of the steps for *Assisting Individuals With Self Administration of Tablets, Capsules, and Liquids.*

Teacher Signature: _____ Date : _____

Comments: _____

Direct Support Professional (DSP) Training
SKILL CHECK #1
Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications
STUDENT INSTRUCTIONS

Directions:

Partner with another member of the class. Each partner should have a *Skill Check #1 Worksheet*. Using the *Worksheet*, practice all the steps in this skill. Have your partner check off each step you correctly complete (PARTNER CHECK). When you are comfortable that you are able to correctly complete all the steps without using the *Worksheet*, ask the teacher to complete the Teacher Check.

Reminders for Assisting With Self Administration:

- ALWAYS store medication in a locked cabinet and/or refrigerator
- NEVER leave medication unattended once it has been removed from the locked storage area
- ALWAYS check for known allergies
- ALWAYS read the medication label carefully and note any warning labels
- Assist only with medication from labeled containers
- Assist only with medication that you have prepared

HELPFUL HINT

*When completing this skill check, remember that you are checking the “**FIVE** Rights” **THREE** Times by reading the medication label and comparing to the Medication Log.*

- **The first check** is when you remove the medication from the locked storage area or storage container.
- **The second check** is when you remove the medication from its original labeled container.
- **The third check** is just before you assist the person with self administration.

COMPETENCY: Each student is required to complete *Skill Check #1 Worksheet, Assisting Individuals With Self-Administration of Tablets, Capsules and Liquid Medications*, with no errors in critical steps.

TEACHER _____

STUDENT: _____

DATE: _____

SKILL CHECK #1 WORKSHEET*Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications*

Scenario: The time is 8:00 a.m. in the morning. The date is the day of the class. The staff is assisting Jacob Smith with self administration of medication.

Please initial each step when completed correctly	Partner Check	Teacher Check		
		Attempt #1	Attempt #2	Attempt #3
STEPS				
		Date	Date	Date
1. Help the person who you are assisting to wash his or her hands	_____	_____	_____	_____
2. Wash your hands	_____	_____	_____	_____
3. Get the Medication Log for the person you are assisting	_____	_____	_____	_____
4. Gather supplies:	_____	_____	_____	_____
<ul style="list-style-type: none"> The labeled medication storage unit with the medication containers Paper cups for tablets and capsules, plastic calibrated measuring cup or medication spoon for liquid Glass of water Tissues Pen 				
5. As you take each medication container from the person's storage unit, read the medication label and compare to the Medication Log for the:				
<ul style="list-style-type: none"> Right Person Right Medication Right Dose Right Time Check the time on your watch/clock Right Route 	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____	_____ _____ _____ _____ _____

SKILL CHECK #1 WORKSHEET
Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications

Please initial each step when completed correctly	Partner Check	Teacher Check		
		Attempt #1	Attempt #2	Attempt #3
STEPS				
6. Again, as you prepare the medications, read the medication label and compare to the Medication Log for the:	_____	_____	_____	_____
<ul style="list-style-type: none"> • Right Person • Right Medication • Right Dose • Right Time Check the time on your watch/clock • Right Route 				
7. For tablets or capsules, pour the correct dose into the lid of the container and then into a small paper cup	_____	_____	_____	_____
8. For bubblepacks, push tablets/capsules from the bubblepack into a small paper cup	_____	_____	_____	_____
9. For liquid medication, pour the correct dose into the plastic measuring cup held at eye level	_____	_____	_____	_____
<ul style="list-style-type: none"> • View the medication in the cup on a flat surface 	_____	_____	_____	_____
<ul style="list-style-type: none"> • Pour away from the medication label to avoid spills 	_____	_____	_____	_____
<ul style="list-style-type: none"> • If any spills on the bottle, wipe away <p style="text-align: center;">OR</p>	_____	_____	_____	_____
When using a measuring spoon:				
<ul style="list-style-type: none"> • Locate the marking for the dose 	_____	_____	_____	_____
<ul style="list-style-type: none"> • Hold the device at eye level and fill to the correct dosage marking 	_____	_____	_____	_____
<ul style="list-style-type: none"> • Pour away from the medication label to avoid spills 	_____	_____	_____	_____
<ul style="list-style-type: none"> • If any spills on the bottle, wipe away 	_____	_____	_____	_____

SKILL CHECK #1 WORKSHEET
Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications

Please initial each step when completed correctly	Partner Check	Teacher Check		
		Attempt #1	Attempt #2	Attempt #3
STEPS				
10. Talk with the person you are assisting about what you are doing and about why he or she is taking each medication	_____	_____	_____	_____
11. Again, just before putting the medication within the person's reach, read the medication label and compare to the Medication Log for the:	_____	_____	_____	_____
<ul style="list-style-type: none"> • Right Person • Right Medication • Right Dose • Right Time Check the time on your watch/clock • Right Route 				
12. Place the medication within the person's reach	_____	_____	_____	_____
13. Offer a glass of water	_____	_____	_____	_____
14. Make sure that the person takes the medication and drinks water	_____	_____	_____	_____
15. Record that the person took their medication by initialing the date and time in the proper box on the Medication Log	_____	_____	_____	_____
16. Return the medication containers and bubble pack to the person's storage unit. As you do so, read the labels to check that the person's name on the medication container label is the same as the name on the storage unit.	_____	_____	_____	_____

Direct Support Professional (DSP) Training
SKILL CHECK #1
Assisting Individuals With Self Administration of Tablets, Capsules, and Liquid Medications
CERTIFICATION

This is to certify that (Name of Student)_____

correctly completed all of the steps for *Assisting Individuals With Self Administration of Tablets, Capsules and Liquids.*

Teacher Signature: _____ Date : _____

Comments: _____

Name: Jacob Smith			Insurance Co: Medi-Cal							Insurance #:N/A							Medical #: 000111							" Medicare #: N/A								
Drug/Strength/Form/Dose	Hour	Month & Year :														Date:																
		1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
ABC Pharmacy 1017 25th St., Sacramento, CA Phone: 000-000-0000 Fax: 000-000-0000 Rx: 10387 Dr. Diaz Patient: Jacob Smith 05/15/01 TAKE ONE TABLET ORALLY AM FOR SEIZURES (8AM) Discard by: 06/01/02 Filled by: BRS QTY: 30 Refills: 2 TIGGYETOL 400 mg TABLET	8:00a																															
ABC Pharmacy 1017 25th St., Sacramento, CA Phone: 000-000-0000 Fax: 000-000-0000 Rx: 10483 Dr. Anderson Patient: Jacob Smith 06/04/01 TAKE ONE TABLET ORALLY EVERY EIGHT HOURS FOR TEN DAYS FOR BRONCHITIS (8AM, 4PM, 12AM) Discard by: 07/01/02 Filled by: BRS QTY: 30 Refills: 0 AMAXICILLIN 250mg TABLET																																
ABC Pharmacy 1017 25th St., Sacramento, CA Phone: 000-000-0000 Fax: 000-000-0000 Rx: 10484 Dr. Anderson Patient: Jacob Smith 06/04/01 Liquid: TAKE 5cc EVERY SIX HOURS FOR COUGH (2AM, 8AM, 2PM, 8PM) Discard by: 07/01/02 Filled by: BRS QTY: 100CC Refills: 0 RUBYTUSSIN																																

FOR _____

MEDICATION ERROR LOG

<u>Date</u>	<u>Time</u>	<u>Medication & Dosage (Error or Omission)</u>	<u>What Happened, Consumer Response, and Actions Taken by Staff</u>	<u>Who was notified, e.g., Physician, Administrator, Emergency Services, etc.</u>	<u>Signature of person making report</u>

INSTRUCTIONS FOR USE: Circle date and time of error or omission on reverse side. Complete report on each error or omission indicated on this page.

Key Word Dictionary

Wellness: Medication

Session #10

Documentation

Documentation is the written recording of events, observations and care provided.

Drug (Medication) Interactions

Drug interactions are the pharmacological result, either desirable or undesirable, of drugs interacting with themselves, other drugs, foods, alcohol, or other substances, such as herbs or other nutrients.

Generic Name

Generic name is the name given by the federal government to a drug.

Medication Error

Medication error is any time that the right medications is not administered to the right person in the right amount at the right time and by the right route or method (as prescribed).

Medications

Medications are substances taken into the body (or applied to) for the purpose of prevention, treatment, relief of symptoms, or cure.

Ophthalmic

Ophthalmic refers to the eyes.

Otic

Otic refers to the ears.

Over-the-Counter Medications

Over-the-counter medications which can be purchased without a prescription.

Pharmacy

Pharmacy is the practice of preparing and dispensing drugs. The physical building where drugs are dispensed is referred to as the pharmacy or drug store.

Pharmacist

Pharmacist is a licensed individual who prepares and dispenses drugs and is knowledgeable about their contents, side effects and interactions with other medications and foods.

Physicians

Physicians are medical doctors.

Prescription Medications

Prescription medications must be ordered by a physician (or other person with authority to write prescriptions).

PRN

PRN (pro re nata) stands for “as necessary.”

Self-Administration

Self-administration of medications is the independent management of one's medication. Individuals must be able to recognize and understand why they are taking each medication.

Side Effects

Side effects are effects produced by the medication other than the one for which it was prescribed. Side effects may be desirable or undesirable, predictable or unpredictable, harmless or dangerous, sometimes even deadly (fatal).

Trade Name

Trade name, or brand name, is the name given by the manufacturer to a drug.

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